

WHITE HOUSE INITIATIVE ON ASIAN AMERICANS AND PACIFIC ISLANDERS

SPEAKER & PARTICIPATION REQUEST FORM

Thank you for your interest in having the White House Initiative on Asian Americans and Pacific Islanders and/or the President's Advisory Commission on Asian Americans and Pacific Islanders participate in your event. Please review and complete this form and return as soon as possible to Bessie Chan at Bessie.Chan@ed.gov and Shelly Coles at Shelly.Coles@ed.gov. Also, all documents listed below can be forwarded via email and should be provided in addition to this form. Please provide the following information:

- Formal Letter of Invitation
- Agenda (Draft or Final)
- Participant List

1. Requesting Organization:

- Other Relevant Materials

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Point of Contact:	Agency/Organization:	
Title:		
Work Phone:	Email:	
Cell Phone:		

Background Information on Agency/Organization (Provide Brief Description if Non-Federal Agency): Do not provide link to website without a brief description. A brief narrative on agency program/division or organization is required.

2. WHIAAPI Staff/Commission:

a)	Name of WHIAAPI Staff/Commissioner Invited:		
	Note: In the event the Initiative Staff/Commissioner named is not available, will you consider another Staff member or Commissioner to participate in this event? □ Yes □ No		
b)	What is the role of WHIAAPI Staff/Commissioner?:		
	☐ Keynote ☐ Remarks ☐ Moderator ☐ Panelist ☐ Guest ☐ Other (Specify):		
c)	How much time to speak?		
	Start Time:		
	End Time:		
	Pre or Post Event?		
	□Yes □No		
	(If yes, please provide a description and attach event details).		
3.	Event Details:		
	a) Type of Event: □ Meeting □ Conference □ Symposium □ Other		
	b) Event Theme/Topic:		
	c) Event Date:		
	i) Event Start Time:		
	ii) Event End Time:		
	d) Event Location (Provide Full Name of Venue & Address – No P.O.):		
	e) Confirmed & Invited Speakers: (Please provide speaker names and brief bios, if available)		

		students).
	g)	Approximate # of Attendees: (If possible, please forward attendee list post-event.)
	h)	Set-Up: □ Town Hall □ Roundtable □ Classroom □ Theatre-style □ Other (Specify)
	i)	Stage Set-Up: (single podium w/mic, table podium w/mic, table on stage (panel), platform, etc.).
4.	Otl	her Details:
	a)	Who will introduce WHIAAPI Staff/Commissioner? Please provide name, title and bio, if applicable.
	b)	Bio and Photo Required of WHIAAPI Staff/Commissioner? □ Yes □ No
	c)	Topics that you would like to have emphasized in the speech?
	d)	Event Attire: □ Business/Professional □ Casual □ After 5 □ Black Tie
	e)	Presentation and/or Handouts Required? □ Yes □ No
	f)	Are there other materials required? (Please indicate)
	g)	Will Media be Present? □ Yes □ No
	h)	Will Ethnic Media be Present? □ Yes □ No

f) Targeted Audience (e.g. health, education, industry; federal, state and/or local officials; youth;

	i)	Will Event be Recorded?	
		□ Yes □ No	
(If	rece	orded will the recording be shared internally or externally?)	
	j)	Will event be live?	
		□Yes □No	
	k)	Will social media be used?	
		□Yes □No	
5.	Ωt	her Costs:	
٥.	Oi	ner Costs.	
 a) Are there fees associated with this event? If so, please indicate whether fees are wai and other invited guests, speakers or participants. 			
		i) Registration and/or Conference Fee (Enter Amt):	
		ii) Meals Included (Breakfast, Lunch or Dinner):	
	b)	Fundraiser?	
	ŕ	□ Yes □ No	
		(If yes, provide information on the fundraiser and what or whom it will benefit.)	
6.	Tr	avel :	
	a)	Nearest Airport and Distance to Event/Hotel (If Applicable):	
	b)	Nearest Train Station and Distance to Event/Hotel (If Applicable):	
	c)	Is Parking Available? (Please provide details).	
	d)	Please suggest a hotel, if an overnight stay is required:	
	e) Will transportation be provided to and from airport/train station and event for WHIAAPI Staff/Commissioner?		
	f)	Are travel funds allocated for participation in this event to be paid by the requesting organization?	
		□ Yes □ No	
		If funds are provided by the organization for Staff/Commission to travel or participate in event, please indicate the type and cost of maximum allowable amounts below:	

COSTS	VALUE
Transportation	
Air	
Train	
Other (describe)	
Meals (indicate date – breakfast, lunch, dinner)	
Accommodations	
Meeting, conference, and registration fees	
Ground transportation/other (tips, cab fares)	
TOTAL VALUE OF BENEFITS	

REMEMBER TO PROVIDE ANY ADDITIONAL AND RELEVANT INFORMATION.

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- Agenda (Draft or Final)
- Participant List
- Other Relevant Materials

^{*}Note: All invitations for WHIAAPI Staff or Commissioner participation require the approval of the Office of General Counsel. Thus, the request for information should be returned as soon as possible to Bessie Chan at Bessie.Chan@ed.gov and Shelly Coles at Shelly.Coles@ed.gov.